BEST AVAILABLE COPY														
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number 9918 905 17055-0348														
	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN		
TC	TAL CLAIMS		36)			Г	RATE	FEE	1	RATE	FEE		
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00			
TOTAL CHARGEABLE CLAIMS			30 min	us 20=	10			X\$ 9=		OR	X\$18=	100		
INDEPENDENT CLAIMS			G mi	nus 3 =	•			X40=	:	OR	X80=	24.0		
MULTIPLE DEPENDENT CLAIM F			RESENT					+135=		OR	+270=	74. ~		
• H	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1.120		
	A CI	LAIMS AS A (Column 1)	MENDED	- PAR (Colu		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	al v	HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	· 30	Minus	3	36	=		X\$ 9=	_	OR	X\$18=			
AME	Independent	· 7 NTATION OF MI	Minus		6	<u> = /</u>		X40=		OR	X80=	84.00		
	THO THE OE	THICK OF W	JETT LE DEF	ENDEN	CLAIM		, [+135=		OR	+270=			
							. A	TOTAL	. ,	OR	TOTAL ADDIT. FEE	84 00		
		(Column 1)		(Colu		(Column 3)					У			
RNT B		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT B	Total	. 30	Minus	. 3	0	=] [X\$ 9=		OR	X\$18=			
	Independent	• +	Minus	***	6	= /	 	X40=		OR	X80=			
		NTATION OF MI	JUTIPLE DEF	PENDENT	CLAIM		J ├	40-		- 1			, .	
	4-2	; 0 Y						+135=		OR	+270=			

(Column 2) HIGHEST (Column 1) (Column 3) CLAIMS AMENDMENT C REMAINING NUMBER PRESENT ÄFTER AMENDMENT PREVIOUSLY EXTRA PAID FOR 30 Total Minus Minus Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	7
TOTAL ADDIT, FEE		OR	TOTAL	\$

ADDIT. FEE

TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 8/00)